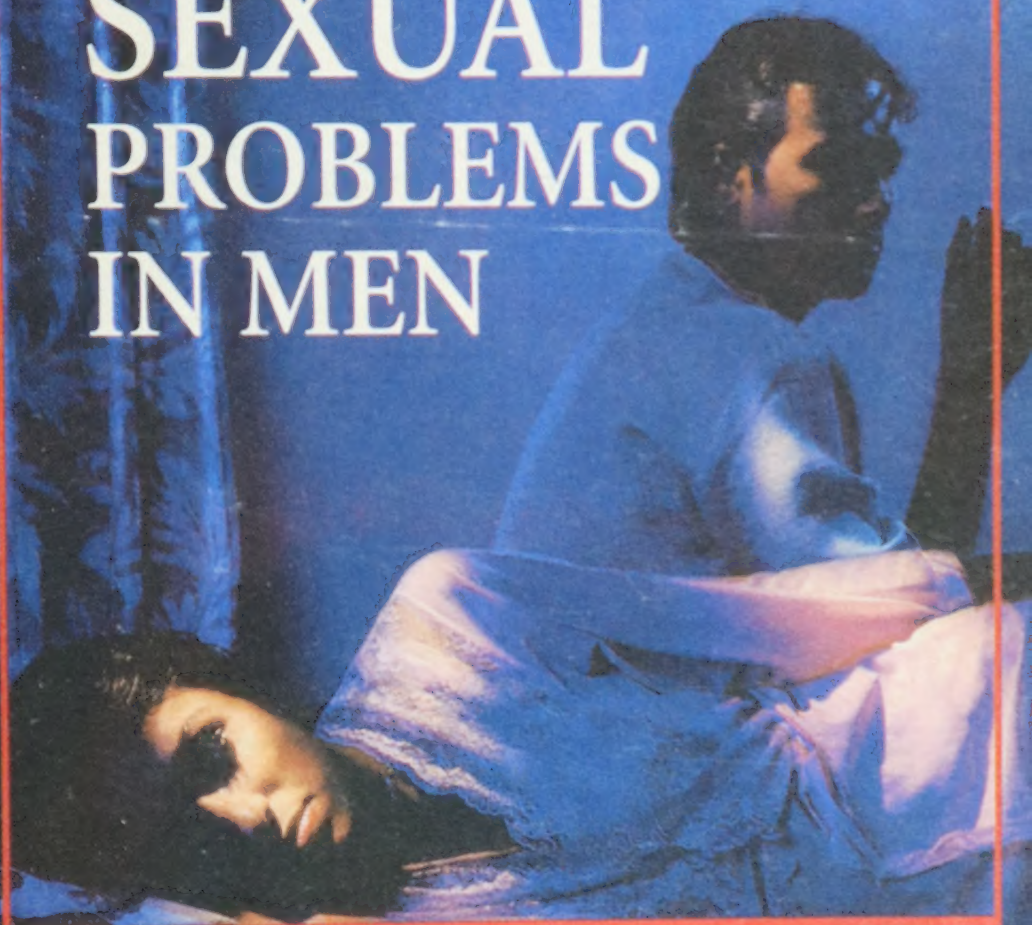


# TheWeek

SEPT 28, 2003

## SEXUAL PROBLEMS IN MEN





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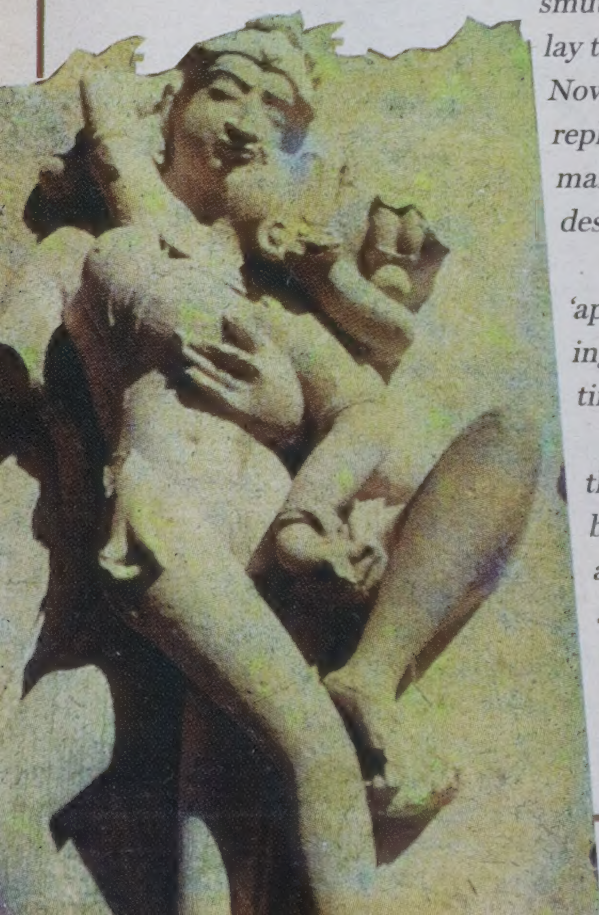
## Introduction

*It is said that men have the 'ostrich syndrome' when it comes to their health, especially sexual health. They prefer to bury their heads in the sand rather than face the issues. It is almost laughable considering the importance an average man attaches to sex and sexual relationships.*

*A lot of misinformation is spread through 'the smut books', which most men manage to lay their hands on before they graduate. Now it's even easier, with the Internet replacing books. All of these make a man a victim of his own ignorance and desire.*

*No wonder then that the so-called 'aphrodisiac and performance enhancing drugs', and quacks are into boom time.*

*This booklet looks at the issues that affect a man's sexual well-being—its reasons and solutions. It also shatters some myths about male sexuality and suggests lifestyle changes to prevent sexual disorder. A collection of frequently asked questions follow later.*



## Men's sexual health

**S**exual problems are difficulties, occurring during sexual intercourse, which hamper a man's sexual fulfilment. The different stages of sex are desire, arousal, orgasm and resolution.

Sexual problems can occur early in a man's sexual life or after a few years of active and satisfying sexual life. The problems can appear gradually over a period or can manifest suddenly. Reasons could be both physical and psychological.

There are problems related to both desire and response. Some people just do not want to have sex for a long time while some want to but cannot. The reasons for why he cannot may be within himself or in his relationship with his partner.

Sexual problems can be categorised into

### **Sexual arousal disorders**

Also known as impotence or erectile dysfunction. There may be partial or complete failure to attain or maintain an erection, or a lack of sexual excitement and pleasure in sexual activity.

Causes could be chronic disease, or the nature of the relationship between the partners. As the success of Viagra attests, most erectile disorders in men are primarily physical, not psychological.

### **Sexual desire disorders**

These can be caused by physical, psychological or extraneous reasons. Biologically they are caused by the decrease in testosterone, the male sex hormone. Fatigue





AP

*Problems can occur early in a man's sexual life or after a few years of active and satisfying sexual life.*

and tension also have been known to cause this problem. Psychiatric conditions, such as depression and anxiety may also be the cause. Some drugs are also known to lead to this disorder.

### **Orgasm disorders**

A persistent delay or absence of orgasm following a normal sexual excitement phase. The disorder can occur in both women and men. Again, antidepressants are found to delay orgasm or eliminate it entirely.

### **Sexual pain disorders**

They are normally not seen in men.

# Arousal disorders

**P**roblems with desire have often been written off as impotence. Impotence is when a man cannot get or keep an erection long enough to have sex. It is also called erectile dysfunction.

Impotence is common and most men have it every once in a while or for short periods of time. Though impotence is most common in men above 65, it can occur in middle-aged or younger men.

In older men, impotence is normally caused by a physical cause, such as disease, injury, or side-effects of drugs. In fact, any disorder that causes injury to the nerves or impairs blood flow in the penis can cause impotence. Instances of impotence increases with age. Though it was once considered a part of ageing, it is actually not. It often has a cause that can be treated.

Men have always felt awkward accepting their impotence and talking about it. But the truth is that there is help for most men.

Impotence is treatable at any age. More men have been seeking help and returning to normal sexual activity because of improved, successful treatments for erectile dysfunction.

## **The anatomy of an erection**

Arteries and veins penetrate the long cavities running the length of the penis. Erection occurs when relaxed muscles allow the corpora cavernosa to fill with excess blood fed by the arteries, and drainage of blood through the veins is blocked.



## What causes impotence?

Impotence can occur when something gets in the way of the process of an erection. Since an erection involves a series of perfectly coordinated set of events involving the brain, which controls what you see, hear, feel, smell and think; the nerves, which pass messages from your brain to your body; and the blood vessels in your penis, which open to allow blood to flow in, impotence can occur when any of the events are disrupted.

### Physical causes

Majority of cases of impotence have a physical cause. Physical causes include diseases that damage the blood vessels and block blood flow into the penis. Certain diseases damage the nerves that carry messages of arousal from your brain to your blood vessels. Other diseases can lower testosterone or other male hormone levels.

The main physical causes are:

**Diabetes:** Up to 25 per cent of all diabetic men aged around 35 and 75 per cent aged around 65 are affected by erectile dysfunction.

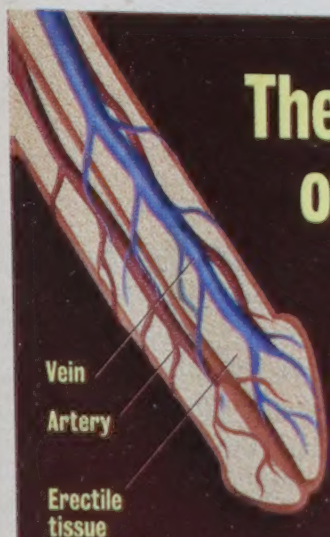
**Inadequate blood flow:** Inadequate blood flow to the penis because of atherosclerosis (thickening of arteries) or damage is the cause of erectile dysfunction in 40 per cent cases. Smoking—a leading cause in up to 80 per cent of the cases—constricts the blood vessels and damages the arteries leading to the penis. One little-known cause of damage to key blood vessels is cycling.

**Alcoholism:** Alcohol can damage the nerves leading to the penis, reduce testosterone levels and increase levels of the female hormone oestrogen.

**Side-effects of drugs:** Erectile dysfunction can be a



# The chemistry of erection



Erectile dysfunction is the inability to attain or keep an erection long enough for sexual activity.

When a man is sexually stimulated, the nerve endings and penile cells release nitric oxide.

Nitric oxide activates enzymes that cause an increase in cyclic guanosine monophosphate (cGMP) levels. cGMP allows tissues around the penile arteries to relax.

When the tissues relax, the arteries dilate, causing more blood to flow in. PDE-5 is an enzyme that binds to cGMP and digests it. An erection weakens if cGMP is digested too fast; its effect on the smooth muscles of the penis is reversed.

Normal state



Erect state



side-effect of drugs like tranquilisers and those used to treat high blood pressure, heart disease, depression, peptic ulcer and cancer. As many as 25 per cent of cases may be caused by drugs taken to treat other conditions. There are also drugs which affect the flow of blood to your penis or the hormone levels in your blood.

**Spinal cord injury:** Almost a quarter of men with spinal injury have a problem with erection.

**Prostate gland surgery (or other surgery around the pelvis):** The risk depends on the type of surgery, but up to 30 per cent of men who have a radical prostatectomy (the complete removal of the gland affected by cancer) will experience erectile problems.

### Psychological reasons

The main psychological causes of ED are:

**Relationship conflicts:** How you are feeling about your life and about your relationship with your partner can add to impotence. Many men get erectile problems regularly after they have had it once.

**Stress and anxiety:** Stress and anxiety generally or about performance in bed may cause erectile dysfunction. Once a man has had a problem getting an erection, he feels nervous about having sex. The more he worries about having an erection, the more the trouble he may have getting one.

**Depression:** 90 per cent of men affected by depression also have complete or moderate erectile dysfunction.

**Sexual boredom:** What a man does during sex may also add to problems getting and keeping an erection. People's needs change over time or because of certain



physical conditions.

One rough-and-ready way of working out whether your erectile dysfunction has a physical cause is to see what are the circumstances in which you get an erection. If you get an erection when masturbating but not with a partner, if you wake up with an erection or have erections during the night, then there is a good chance that your erectile dysfunction has psychological causes.

### Physical causes of impotence

- ❖ Alcoholism
- ❖ Fatigue
- ❖ Atherosclerosis (hardening of the arteries)
- ❖ Diabetes
- ❖ Brain or spinal-cord injuries
- ❖ Hypogonadism (which leads to lower testosterone levels)
- ❖ Liver or kidney failure
- ❖ Multiple sclerosis
- ❖ Parkinson's disease
- ❖ Radiation therapy to the testicles
- ❖ Stroke
- ❖ Some types of prostate or bladder surgery
- ❖ High cholesterol
- ❖ Reactions to certain medications
- ❖ Damage to nerves, arteries, smooth muscles, and fibrous tissues, often as a result of disease.
- ❖ Radical prostate surgery for cancer
- ❖ Injury to the penis, spinal cord, prostate, bladder, and pelvis.

## Smoking does not make you big; it causes impotence



V. SIVARAM

**20** minutes after you have quit smoking, blood pressure and pulse return to normal levels

**72** hours later, breathing is easier, energy levels increase

**3** months later, erections are harder and sperm count is higher

**12** months later, risk of a heart attack is half that of a smoker

**5** years later, risk of lung cancer is half that of a smoker

### What should you do if you develop impotence?

First the good news. In the recent past, medical science has made major advances in the treatment of impotence and the majority of sufferers can now be treated effectively. The following are the things that are in your control:

Discuss the problem with your partner. A problem shared is a problem halved. Your partner may unintentionally put pressure on you to perform. If you have erection difficulties, this pressure could cause impotence. Discussing the problem may relieve this pressure and restore normal erectile function.

Look at your lifestyle before seeking medical treatment. Are you a heavy smoker? If yes, quit or, at least, cut down immediately.

Do you drink a lot of alcohol? If yes, it would be wise



to cut down on alcohol intake.

Do you suffer from stress and anxiety? Try to reduce stress and anxiety by finding ways to relax.

If these changes do not solve the problem then you should seek medical advice.

If you feel you need medical treatment visit your doctor. Your doctor should be able to do the relevant tests and offer you suitable treatment. If you find that your doctor is unable to do this then ask to be referred to a clinic that deals with sexual dysfunction.

## **Prevention and treatment**

Quitting cigarettes and alcohol will help. Regular aerobic exercise and a low-fat diet will reduce the risks of atherosclerosis.

If you have diabetes, ensure it is properly controlled.

### **Do not**

Bottle up. Keeping your feelings to yourself does not help. Share your worries with your partner. Talking helps.

Do not be tempted to buy herbal supplements or so-called aphrodisiacs and do not take the advice of quacks who might claim to have miracle cures.

Do not blame yourself for your erectile dysfunction. It is a health problem and not a reflection of your masculinity. Do not blame your partner either.

## Feelings that can lead to impotence

Nervousness about sex, perhaps because of a bad experience or because of a previous episode of impotence

Stress from work or family situations

Troubled by problems in your relationship with your partner

Depression

Feeling so self-conscious that you cannot enjoy sex

Thought that your partner is reacting negatively to you

### What are the main treatments?

#### Medications

There are many kinds of treatments available for impotence. They include oral drugs, injection therapy, vacuum pumps, hormonal supplements and penile implants. However, any treatment should be taken only on the advice of a qualified medical practitioner as your treatment depends on the reasons why you have a dysfunction. Do not try self medica-

tion at any cost.

#### Sex therapy

Most men could benefit from counselling and therapy for their erectile problems, irrespective of the cause. In fact, the best treatment centres provide it as a matter of course. Counselling and sex therapy are recommended when there are psychological reasons to the problem rather than medical ones. For instance, if a man has erectile problems because of an emotional conflict with a partner, providing him with a drug that produces an erection is not going to help; in fact, it might make it worse. Men with physically-caused erectile dysfunction may also have lost a great deal of self-esteem and sexual confidence which sex therapy could help restore. It usually makes sense to involve the partner, too, in sex therapy since the loss, as well as the restoration, of a man's erectile functioning will almost inevitably affect their relationship.



# Desire disorders

## Loss of sexual desire

Sexual desire disorder is a condition where one lacks interest in sex. It is also termed as a decrease in libido or sexual drive. Problems with desire can manifest out of numerous reasons. Some issues may be rooted within an individual whereas others may be an individual's response to something that is wrong with his interactions with others, including his partner. However, they generally manifest in two forms.

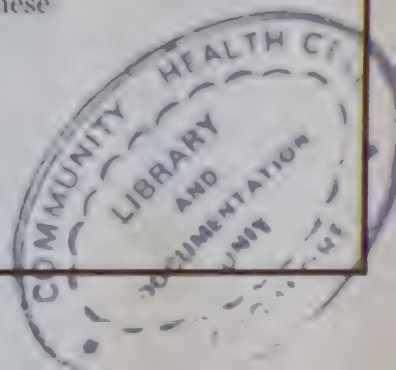
- ❖ A persistent absence of sexual fantasies or desire for participation in sexual activities
- ❖ A total or near total aversion to contact with female genitals

Though it sounds strange, the incidence of this disorder is very high; about 15 per cent of men aged between 18 and 59 lack interest in sex.

## What causes sexual desire disorders?

The identification and treatment of desire problems is still largely a grey area in spite of recent advancements made in unravelling the mystery surrounding it. All one can be sure of is that some psychological or biological mechanism leads to an absence of a desire. Some of these factors are:

- ❖ Relationship difficulties
- ❖ Sexual boredom with a partner
- ❖ Depression, exhaustion, stress
- ❖ Low testosterone level
- ❖ Low sex drive



**Should I see a doctor?**

Yes, if your low level of sexual desire concerns you or is causing problems in your relationship with your partner. Seek advice if you have other symptoms, such as exhaustion, a reduction in facial hair growth or a loss of body hair, shrinking testicles or muscle weakness. These could all be signs of testosterone deficiency.

If you would prefer not to see a doctor, you could contact a sex therapist for counselling. If the therapist believes you have an underlying medical prob-

*Men have always felt awkward accepting their impotence and talking about it. But they should know that there is help.*





lem, you should get it checked out.

### **Prevention and treatment**

Improve the quality of your sleep, cope better with stress, sort out any relationship problems, and find ways of spicing up your sex life.

Get help if you are depressed. Regular exercise may also increase your sense of well-being and feelings of sexual desire. Treatment includes sex therapy and, in a few cases, testosterone supplements.



*See a doctor if the problem is affecting your relationship and if you have symptoms such as loss of body hair or shrinking testicles.*

# Orgasm disorders

**T**hese disorders deal with the timing of a man's orgasm and his inability to control it. In some men it happens too soon (premature) whereas in others it is too late or does not happen at all (retarded ejaculation).

## Premature ejaculation

The exact definition of premature ejaculation still eludes the medical fraternity even though all agree that ejaculation before the penis enters the vagina is premature. It is a problem faced by a man who is unable to recognise that he is ready to ejaculate and therefore, not able to control it.

Premature ejaculation is a very common problem. In fact, it is the most common sexual dysfunction affecting men. About one in three men of all ages suffers from premature ejaculation.

## Why does it happen?

It has been medically agreed that the pelvic muscles, specifically the muscles that surround the erectile bodies in the penis, are in a hyperactive state in men with premature ejaculation. During ejaculation there is increased activity of this group of muscles. So, it is likely that men who have premature ejaculation have hyperactive muscles. However, the widespread belief is that it is very rarely caused by a physical problem.

## Cause

Stress

Anxiety about sex (perhaps because of a fear of preg-



nancy, a sexually-transmitted infection or failure to perform adequately)

Relationship difficulties and the lasting effects of teenage sexual experiences, which had to be quick to avoid detection

### **Retarded (delayed) ejaculation**

Retarded ejaculation relates to the inability to ejaculate or a long delay before ejaculation. Men who suffer from retarded ejaculation may experience it regularly or occasionally. In certain situations like during masturbation or oral sex they achieve timely ejaculation but have problems when it comes to intercourse. It is, however, not a common problem.

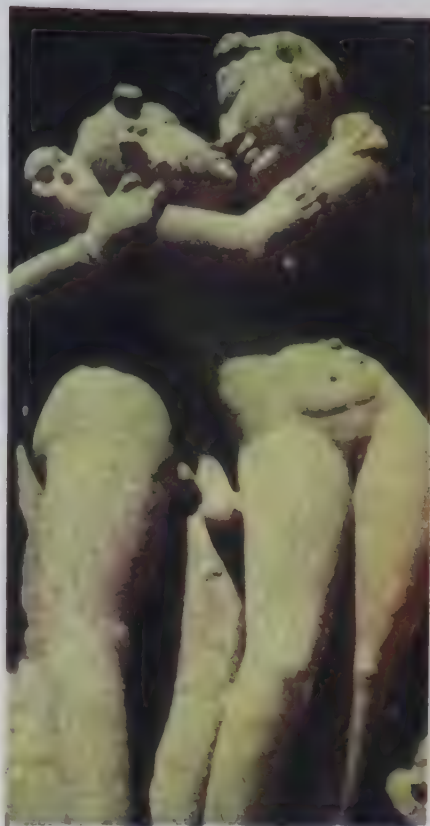
#### **Cause**

There are no clear-cut answers as to why retarded ejaculation happens.

Most of the causes are psychological, such as performance anxiety, self-consciousness, stress and relationship difficulties. Some men find that they can ejaculate normally during masturbation but are unable to ejaculate during intercourse. This does not mean that the vagina is too loose and not giving adequate stimulation to the penis. The problem is psychological.

#### **Age**

It is not unusual for men above the age of 70 to experience failure of ejaculation. This may simply be part of the



*Premature ejaculation is the most common sexual dysfunction affecting men.*



*To tackle delayed ejaculation, find ways of coping with stress and resolve difficulties with your partner.*

ageing process. However, ageing is associated with decreased penile sensitivity, which means older men need more prolonged and direct penile stimulation to achieve ejaculation than younger men. Sometimes ejaculation fails just because a man does not have sufficient penile stimulation.

#### **Effects of certain medications**

It can be the side-effect of certain antidepressant drugs or the result of nerve damage.

#### **Physical factors**

It can also be caused by physical factors such as a hormone imbalance or nerve damage because of pelvic injury or surgery or diabetes.

#### **What can be done to prevent it?**

One cannot do much, except find better ways of coping with stress, of relaxing, and of resolving difficulties with your partner.



**Should I see a doctor?**

You could see a doctor if the problems persists, causing you anxiety and affecting your relationship with your partner. You may visit a urologist or a sex therapist to sort out this disorder.

**How can you help yourself?**

Talk to your partner about your problem. This may help relieve some of the pressure you feel. Try to find ways together to make sex more exciting.

Try relaxation exercises to tackle stress. One simple but effective exercise involves tensing and relaxing each of your muscle groups, starting with your feet and then moving up your body. Clench each set of muscles for a few seconds, focus on the feeling and then gradually relax. Finish with your forehead. This exercise helps counteract the muscle tension that accompanies stress.

Human penis is a creature of habits. Rhythms of masturbation become set and the penis would react only to the same strokes. Thus your body may not be able to respond to anything different. So try expanding your masturbatory repertoire. Gradually you will notice your body's increased sensitivity to a variety of touches.

*The aim of the squeeze technique is to enable the man to control and delay orgasm.*



### **How to tackle premature ejaculation?**

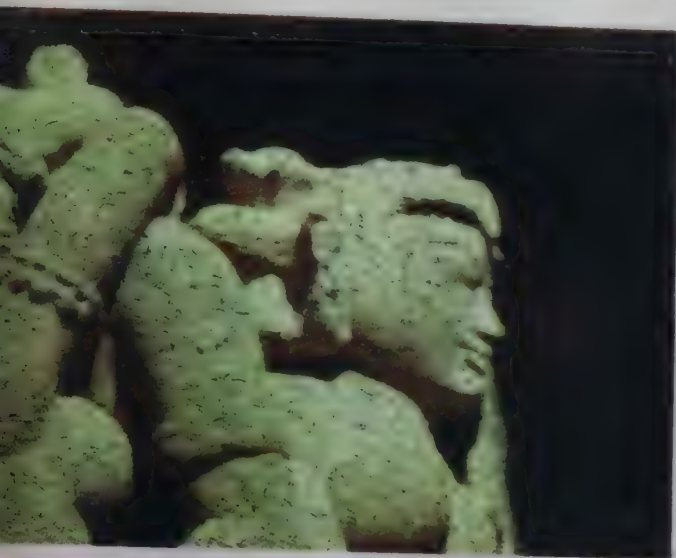
#### **Stop-start**

Stimulate your penis (or ask your partner to do it for you) until you are near the point of ejaculation. Then stop and rest for 30 to 60 seconds before stimulating it again. Repeat this process five or six times in each session.

#### **Squeeze**

Stimulate your penis (or ask your partner to do it for you) until you are near the point of ejaculation. This time, you or your partner should firmly squeeze around your penis just below the glans (head)—put your thumb on the underside of the penis in the indent where the head meets the shaft (the frenulum) and your first and second fingers on the other side of the penis, on either side of the ridge that separates the head from the shaft. The squeeze has the effect of preventing ejaculation. The goal of this technique is to teach the man to become aware of the sensations leading up to orgasm, and then begin to control and delay his orgasm on his own. This technique progresses from manual stimulation to motionless intercourse to intercourse with both partners moving. The reported success rate is 98 per cent.



**Relax**

A relaxed mind achieves much better results than a tense mind. So, do not get depressed or anxious about a sexual relationship. Try a relaxing bath or using deep breathing techniques.

Ensure that you do not carry any anxiety or unhappiness in your head before sex. Both your head and heart have to be in a mood for sex as well as your body. If you are unhappy about something with your partner then sort it out first.

**Exercise the pelvic floor**

Many men say they are able to delay ejaculation by 'squeezing' or 'pushing' their pelvic floor muscles.

**Change positions**

During intercourse, try the stop and start technique. When the sensations become strong and when you're confident, try changing positions rather than stopping.

Some medications are also available. It is better to consult your physician before taking any drugs. And remember that quacks and the so-called delay tablets do not help at all. Avoid self-medication.

*When the sensations become strong, try changing positions rather than stopping.*



RAJHEN PAUL

**Things to remember**

Talk to your partner about your feelings and find ways of developing intimacy that are not linked to sex alone.

Avoid consulting quacks. And the so-called aphrodisiacs—there is no good evidence that any of them work.



# Allay your fears

**At what age does erectile dysfunction start affecting men?**

Erectile dysfunction can occur and affect men of any age. In younger men, it is likely to be of psychological origin. In older men it is more likely to be of organic or physical origin. The prevalence of erectile problems of around 40 per cent in 40-year-old men and 70 per cent in 70-year-old men.

**I'm a diabetic with erectile dysfunction. My doctor ignored my sexual problem. How can I get him to take this problem seriously?**

Endocrinologists may not be willing to treat erectile dysfunction. If your doctor is unwilling to take care of this problem, you could see a urologist. Any urologist in your area would be happy to undertake this aspect of your treatment.

**Should my partner be involved in the choice of alternative treatments?**

It would be useful to take your partner along when initially seeing a physician regarding your erection problem. It is easier for two people to remember what was said and to come up with relevant questions when talking to your physician. It is also better if your partner understands the treatment.

**Are there any new treatments?**

There are no radically new treatments. There are several drugs that have undergone some testing and have not yet been approved by FDA.

**Does diet have an effect on erectile dysfunction?**

Diet probably has little overall effect on the disorder.

## **Safe sex and sexually transmitted diseases**

Look for the following symptoms:

Sores, blisters, ulcers or growths on the genitals

A discharge from the penis

A tight foreskin

Loss of sexual desire

Problems with urination including pain, or blood in your urine

Pain during ejaculation

Painful erections

Absence of erection

Always have sex with a condom unless it is with your partner whom you can trust.

High fat diets, which can lead to high cholesterol levels, might eventually cause vascular diseases and lead to erectile problems. Common non-alcoholic drinks such as soda, tea and coffee have no known effect on erectile function.

### **How does one distinguish between mild and severe cases of erectile dysfunction?**

Mild erectile dysfunction typically is a situation where a patient can obtain an erection and maintain it for some time but it may not be of satisfactory firmness. Severe dysfunction is where a patient cannot get an erection at all. To some extent, the severity of the problem is subjective. Some men may be quite satisfied with an erection



while some others may be unhappy.

**Do certain types of foods, drinks and drugs increase desire?**

No. There is nothing you can take that will increase libido. But since it is said that belief is a potent weapon you may think that your responses are potent. In fact, alcohol, which some believe aids a good performance, acts as a sedative when consumed in large quantities.

**Is there any special ointment that helps erection last longer?**

This is not true. There is an anaesthetic cream which is supposed to reduce sensation and thereby delay ejaculation. But this is not the proper way to develop control over ejaculation. Nothing can replace the feeling of sensations. Also such ointments may rub off on the woman's clitoral area and irritate her.

You should also avoid aphrodisiacs, which actually don't help. Even though there are many ways to have satisfying sex it remains a frustrating and unusual experience for many of us. 53 per cent of men are dissatisfied with their performance in bed and 83 per cent feel there is room for improvement. Since enjoyable sex is so vital to our sexual health as well as our well-being, it is imperative that we find ways of improving our sexual lives.

## Myth and reality

**M**yths have a tendency of reducing our confidence, especially when it comes to sexual relations. In fact, a sizeable percentage of men have dissatisfied sexual relationships because of their insecurities founded on such myths. So let us just blow a few myths to smithereens.

**Myth: A man is one who is always ready for sex**

Reality: Some men clearly have a higher level of sexual desire than others. In fact, loss of sexual desire is surprisingly common in men. Plus loss of interest can be temporary based on your stress levels and depression.

**Myth: It is important to have a large penis**

Reality: While the idea is excitable, the truth is most women are satisfied with average sized organs.

**Myth: Erections should be rock hard**

Reality: A few men may have rock hard erections but most don't. There are occasions when they are not able to reach up to their expectations because of stress or too much alcohol.

**Myth: Masturbation is bad**

Reality: Latest studies indicate that masturbation is actually good for health. Many who feel guilty about it are basing their emotions on false premises. It is completely safe.



# Lifestyle changes

**Y**our lifestyle has a profound effect on your sex life. A healthy lifestyle actually has a positive impact on your sexual health and can help reduce the chances of developing sexual disorders.

## Change your lifestyle to improve your sex life

### Quit smoking

Experts believe that smoking is a major cause of erectile dysfunction. An erection involves the nervous system, vascular system and hormones. Smoking affects all these systems.

### Manage diabetes

Diabetes is one of the major risk factors for erectile dysfunction. Diabetes harm arteries and nerve endings in the penis. Diabetic patients are 2 to 5 times more likely to get erectile problems. So control your blood sugar level through diet, exercise and insulin therapy.

### Control your cholesterol levels

An erection requires the circulatory system to be healthy. High cholesterol can harden, narrow or block the arteries to your penis. Get your cholesterol checked regularly, and visit a doctor if it is high.

### Avoid substance abuse

Tobacco, alcohol and drugs are a major cause of impotence. Avoid all.



V. SIVARAM

*Alcohol can damage the nerves leading to the penis and reduce testosterone levels.*



V. SIVARAM

*Regular exercise reduces your chance of developing erectile dysfunction.*

### **Destress**

Stress and anxiety are one of the major causes of erectile dysfunction. Reducing stress improves the chances of better erections.

### **Shed the flab**

Obese and fat men are more likely to have erectile problems than men with normal weight. Losing weight helps you protect your health and erectile ability.

### **Exercise regularly**

Regular exercise helps keep your weight under check and reduces your chances of developing erectile problems.

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## **THE WEEK SUPPLEMENT**

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